

Tempe Parks and Recreation

3500 South Rural Road, Tempe, AZ 85282



"All City" Fall High School ASA Softball Program

For Girls in High School (grades 9-12) Fall 2000

Introducing, the "All City" Fall High School Softball League. This program operates as an extension of the current softball program and will play under the umbrella of the Amateur Softball Association (ASA). This league is designed to be competitive and for coaches to bring in their entire team. Two games per week will be played Mon.-Thurs. All games will be in the evenings at either 6:30 or 8:30 p.m. A coach will enter an entire team in this league (no individual registration accepted). This league will begin play in late September and conclude with a post-season tournament in early November. Participants must be attending school in fall 2000

Fee: \$25

Program Dates

Monday, September 25 to
Thursday, November 2,
Followed by a Postseason
tournament
(an average of 2 evening
games per week)

Contacts

Shane Isabell @ 350-5222
Dave Sanson @ 350-5226 – 3-6 p.m.



"All City" Fall High School ASA Softball Registration Form

(must accompany the team registration form)

Name _____ Parent's Name _____
Address _____ Day Phone _____ Night Phone _____
City _____ Zip _____ Birthday _____ Age _____ School _____

Waiver of Liability

- With knowledge and appreciation of the risk of injury, I wish to participate in this Activity. I agree to assume the risk of personal injury while participating.
- I understand the City of Tempe does not carry accident, sickness, or medical insurance for participants.
- I understand that all reasonable efforts will be extended to insure my health and safety.
- If the Activity includes any physical exertion, I agree to perform the exercise at my own ability level.
- I fully understand the nature of this Activity, and I waive and release and hold harmless the City of Tempe and any of its agents, employees, officers, council members, and sponsors for any and all rights and claims for damages or costs I may have against the City of Tempe, its agents, employees, officers, council members, and sponsors for personal injury, death, or property damage suffered by me, or that I may cause to others, as a result of my participation in this Activity.
- I agree to look to my private physician for medical advice and care and to notify my teacher or instructor of any physical limitations I might have or modifications I might need to the Activity. I will require the following accommodation to participate: _____
- I have read and clearly understand the above statements. I realize this is a contract between myself and the City of Tempe and is a release of Liability. I sign it of my own free will.

REQUIRED: Parent or Legal Guardian Signature

AND Printed Name

Date

Fee: \$25

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Tempe Parks and Recreation

Info: 480-350-5200 / TDD: 480-350-5050

www.tempe.gov/pkrec



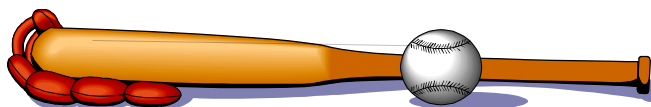
HIGH SCHOOL SOFTBALL REGISTRATION FORM
(PLEASE PRINT: USE **BLACK** INK ONLY)

TEAM NAME _____

COACH _____ Asst. Coach: _____ Ph. # _____

ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ OFFICE PHONE _____ FAX _____



Player	Address	City	Zip	Phone	Grade	Age
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						

ROSTER IS DUE WHEN FEE IS PAID. NO EXCEPTIONS.

Rosters must be filled out completely with the address and phone numbers of each player. Roster will be checked for validity purposes. **Rosters that do not contain complete address and phone numbers of players will not be considered for league entry (ie that player is not officially on the roster).** As the representative of my team I have read and agree to all the rules and regulations of the Fall High School Softball League, and verify to the best of my knowledge that all information given on this form to be true and accurate.

Coaches Signature _____

Date _____